• •			NOTI	CE 2	018-100	2	70000	J ⊤ ~	4 + Z Z	. フ	
Form	990-T	Ex	empt Organization (and proxy tax					rn	OMB No	1545-0687	
		For cale	ndar year 2018 or other tax year begin	nıng _	01/01,2018	, and endi	ng 12/31 , 2	20 <u>18</u>	20	า <b>1</b> 8	
Departr	nent of the Treasury		► Go to www.irs.gov/Form990	_	<del></del>				ے۔۔۔۔	910	
	Revenue Service	<b>▶</b> Do	not enter SSN numbers on this form a					c)(3).	Open to Pu 501(c)(3) O	blic Inspection for rganizations Only	
A	Check box if address changed				me changed and se			D Empl	oyer identification oyees' trust, see	ation number instructions)	
	mpt under section		ELDERSERVE HEALTH,				· · · ·				
	501( C <b>Q</b> 3 )	Print or	Number, street, and room or suite no	faPO	box, see instruction	ns			517818	s activity code	
	408(e) 220(e) 408A 530(a)	Type	   5901 PALISADE AVENU	E					nstructions )	a acurity code	
	529(a)		City or town, state or province, country	y, and a	ZIP or foreign postal	code	<del></del>				
	k value of all assets * nd of year		BRONX, NY 10471						<del></del>		
	-		up exemption number (See instruct tek organization type    X 501			501(c	) trust	401(a)	Other trust		
			nization's unrelated trades or busine						y (or first) un		
	de or business her	-	The distriction of the districti	0000		only one	complete Parts I	-			
			end of the previous sentence, cor	molete		-					
•				ripicio	i and randin, co	inpicto a o	oricodile in for co	on additio			
	de or business, the		corporation a subsidiary in an affili	atod a	roup or a parent o	ubeidian.	controlled group?		<b>N</b>	Yes X No	
~						subsidial y	controlled group?			) 163 <u></u> 110	
			identifying number of the parent co	rporau	on 🚩	Tolophor	e number ▶ 71	8-581	-1317		
					(4) 1		T			C) Not	
	<del></del>		or Business Income	Τ.	(A) Incor	me	(B) Expen	ises	<u> </u>	C) Net	
	Gross receipts or s		c Balance ▶	1c							
	Less returns and allowa Cost of goods sol		ule A, line 7)	2							
			2 from line 1c	3							
			ttach Schedule D)	4a							
	-		Part II, line 17) (attach Form 4797)	4b						· · · · · ·	
			rusts	4c							
			r an S corporation (attach statement)	6			<u></u>				
			come (Schedule E)	7			<del></del>			-	
_			ints from a controlled organization (Schedule F)	8							
9	Investment income of a	section 50	1(c)(7), (9), or (17) organization (Schedule G)	9	_						
			ncome (Schedule I)	10					<del>.  </del>		
	-	•	lule J)				<u> </u>		<del> </del>		
			tions, attach schedule)			0.					
Part	Deduction	ns Not	Taken Elsewhere (See insti	ructio	ns for limitati	ons on o	leductions)(	Except	for contrib	utions.	
	deduction	s must	be directly connected with t	he ur	related busin	ess inco	me)			,	
14	Compensation of	officers,	directors, and trustees (Schedule书)	RF	CFIVED			14	+ -		
15	Salaries and wage	s	(see instructions)	.1.\-		າછ¦∵		15	<del></del>		
16 17	Repairs and main Bad debts	tenance			v 1 5 2019	.  Š		17			
18	Interest (attach so	chedule)	(see instructions)			T81 :		18			
19	Taxes and licenses	s		00	DEN UT			19			
20	Charitable contrib	outions (S	See instructions for limitation rules) 4562).			. بـــ		20		<del></del>	
21	Depreciation (atta	ich Form	4562)		2	21					
	<u>-</u> -		on Schedule A and elsewhere on re		<del></del>			22b	<del></del>		
			compensation plans								
			·								
26	Excess exempt ex	penses (	Schedule I)					26			
~			chedule J)						_		
			chedule)						<del></del>	<del>.</del>	
			s 14 through 28 le income before net operating								
			g loss arising in tax years beginnir								
			gives and and a	9 2					1		

**32** Unrelated business taxable income Subtract line 31 from line 30 For Paperwork Reduction Act Notice, see instructions.

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Form **990-T** (2018)

NEW

Form 990-T (2018)

44-0160260

Phone no 212.867.4000

Fırm's EIN ▶

**Use Only** 

Firm's name

▶ BKD,

LLP

Firm's address ▶ 655 THIRD AVENUE #1200,

Form 990-T (2018)					_					Page 3
Schedule A - Cost of G	oods Sold. Er	ter method	d of invento	ory valuation	<b>&gt;</b>					
1 Inventory at beginning of y	/ear . 1			6 Inventory	at end of yea	r	6			
2 Purchases	2					d. Subtract line			·	
3 Cost of labor				6 from	line 5 Ent	ter here and in	_			
4a Additional section 263A co	osts		-	Part I, line	2		7			
(attach schedule)	4a					section 263A (w	ith re	espect to	Yes	No
<b>b</b> Other costs (attach schedu				property	produced	or acquired for	resal	e) apply		
5 Total. Add lines 1 through	4b 5			to the orga	anization?	<i></i> .				х
Schedule C - Rent Income	e (From Real P	roperty a	nd Persoi	nal Property	Leased W	ith Real Proper	ty)			
(see instructions)	•									
Description of property										
(1)										
(2)										
(3)										
(4)										
	2. Rent recei	ved or accru	ed							
(a) From personal property (if the	percentage of rent	(b) F	rom real and	personal property	(if the	3(a) Deductions di	ectly co	onnected with th	ne inco	ome
for personal property is more th	an 10% but not	percent	age of rent fo	r personal property	exceeds	ın columns 2(a	a) and 2	(b) (attach sche	dule)	
more than 50%)		50% 0	r if the rent is	based on profit or	income)					
(1)										
(2)										
(3)										
(4)										
Total		Total				(b) Total dadmatic				
(c) Total income. Add totals of c	olumns 2(a) and 2(	b) Enter				(b) Total deduction Enter here and on				
here and on page 1, Part I, line 6						Part I, line 6, colum	n (B)	<u> </u>		
Schedule E - Unrelated D	ebt-Financed I	ncome (se	e instruction	ons)						
			2. Gross	income from or	3. D	eductions directly con debt-finance			e to	
1 Description of del	bt-financed property			o debt-financed ; operty	(a) Straigh	t line depreciation	<del></del>	b) Other deduc		
			P'	operty .	(attac	ch schedule)		(attach schedu	ıle)	
(1)										
(2)			ļ							
(3)										
(4)	<del></del>	_								
4. Amount of average acquisition debt on or	5. Average adju- of or alloca		6	Column	7 Gross I	ncome reportable	_	Allocable dedu		
allocable to debt-financed	debt-financed		1	divided column 5		2 x column 6)	(colu	mn 6 x total of 3(a) and 3(b)		ıns
property (attach schedule)	(attach sche	edule)	l by c					J(a) and J(b)		
(1)			ļ	%						
(2)				%						
(3)				%						
(4)				%				<del></del>		
						e and on page 1, e 7, column (A)	Ente Part	r here and on I, line 7, colui	page mn (P	: 1, 3)
						.,	, .	.,	, 2	•
Totals				▶	<u> </u>					
Take to the following and a few all the decades at	: bobudod:	alman O				<b>▶</b> I				

Therest, Ann	unics, moyanics, an		Exempt Controlled Organizations (see instructions)										
Name of controlled organization	2 Employer identification number		3 Net unrela (loss) (see in				of specified		5. Part of column 4 that is included in the controlling organization's gross income		olling	connected with income	
(1)													
(2)													
(3)													
(4)						<u> </u>				<b></b> .			
Nonexempt Controlled Organi	zations						,						
7. Taxable Income	8. Net unrelated i (loss) (see instruc				Total of specifi ayments made		inc	clude	of column d in the co ition's gros	ntrolling		Deductions directly     nnected with income in     column 10	
(1)													
(2)													
(3)												· ·	
(4)	. <b>_</b> _		<u> </u>	_								<del> </del>	
Totals	ncome of a Sec	ction 5	 01(c)	 (7),	(9), or (17		En Pa	nter ho art I, I	olumns 5 a ere and on line 8, colu	page 1, mn (A)	En	dd columns 6 and 11 ter here and on page 1, art I, line 8, column (B)	
1. Description of income	2. Amount o	f income			3. Deduction directly co. (attach sci	nnected				t-asides schedule)		Total deductions     and set-asides (col. 3     plus col. 4)	
(1)													
(2)													
(3)	<del>  -</del> ·									<u> </u>		<del>-</del>	
(4)	Enter here and							-				Enter here and on page 1	
Totals ▶ Schedule I – Exploited Exe	Part I, line 9, c		Othe	r Th	an Advert	ising Ir	com	e (se	ee instru	ctions)		Part I, line 9, column (B)	
Description of exploited activity	2. Gross unrelated business income from trade or business	3 Expenses directly connected w production of unrelated business incore		rith of	4. Net income (loss from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7		5. Gross income from activity that is not unrelated business income		6. Expenses attributable to column 5		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)		
(1)													
(2)													
(3)					l						_		
(4)													
	Enter here and on page 1, Part I, line 10, col (A)	Enter he page line 10	1, Part	I,			<u> </u>					Enter here and on page 1, Part II, line 26	
Totals ▶ Schedule J- Advertising In	Somo (ann innte				<u> </u>	<del></del>							
				1	datad Da	-!-			<del></del>			<del></del> -	
Part I Income From Per	lodicals Report	tea on a	COI	nsoli	dated Bas	SIS	-			<u> </u>		<del></del>	
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs		ests	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7		5. Circulation income		6. Readership costs		7. Excess readership costs (column 6 minus column 5, but not more than column 4)		
(1)													
(2)			_									$\neg$	
(3)					1							7	
(4)	-											$\neg$	
Totals (carry to Part II, line (5))												Form <b>990-T</b> (2018	

80-0517818

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis) Part II

2. Gross advertising income	3 Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
					<u> </u>
Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
n of Officers, D	irectors, and Tr	ustees (see instr	ructions)		
	2	Title	3. Percent of time devoted to business		
			_%		
			%		
			%		
			%		
	Enter here and on page 1, Part I, line 11, col (A)	advertising advertising costs  Enter here and on page 1, Part I, line 11, col (A) Income  Enter here and on page 1, Part I, line 11, col (B)  n of Officers, Directors, and Tr	2. Gross advertising income  3 Direct advertising costs  2 minus col 3) If a gain, compute cols 5 through 7  Enter here and on page 1, Part I, line 11, col (A)  Enter here and on page 1, Part I, line 11, col (B)	2. Gross advertising income  3 Direct advertising costs  2 minus col 3) If a gain, compute cols 5 through 7  Enter here and on page 1, Part I, line 11, col (A)  Enter here and on page 1, Part I, line 11, col (B)  1. Title  3. Circulation income  5. Circulation income	2. Gross advertising income  3 Direct advertising costs  3 Direct advertising costs  2 minus col 3) If a gain, compute cols 5 through 7  Enter here and on page 1, Part I, line 11, col (A)  In of Officers, Directors, and Trustees (see instructions)  2. Title  3 Direct advertising costs  5. Circulation income  6. Readership costs  6. Readership costs  1 Directors  5 Directors  6 Directors  7 Directors  7 Directors  7 Directors  7 Directors  8 Directors  9 Di

Form 990-T (2018)